

**Appendix V: Notice of Intent (NOI), Notice of Change (NOC), and Notice of Termination (NOT) Suggested Forms & Instructions**

## **I. Suggested Notice of Intent (NOI) Form**

In order to be covered by the remediation general permit (RGP), applicants must submit a written Notice of Intent (NOI) to EPA Region I and the appropriate state agency. **All parties meeting the definition of “operator” must fill out, sign, and submit separate NOIs.**

The “operator” is defined in Part I.B.1. as the person<sup>1</sup> who has operational control over plans and specifications, or the person who has day-to-day supervision and control of activities occurring at the site. For purposes of this permit, the operator is either:

- i. The owner<sup>2</sup> (e.g., title holder, developer, or easement holder of the property) if that entity is performing all work related to complying with this permit; **or**
- ii. Both the owner<sup>2</sup> (e.g., title holder, developer, or easement holder of the property) and contractor(s) if a contractor(s) has been hired to perform work related to complying with this permit.

This means that each party meeting the definition of operator should apply for coverage under the RGP if it has operational control over either the project site plans and specifications, including the ability to make modifications to those plans and specifications (e.g., the property owner), **or** has day-to-day operational control of those activities at a project which are necessary to ensure compliance with permit conditions (e.g., the contractor). Where a party’s activity is part of a larger common plan (e.g., for the development or sale of the property), that party is only responsible for applying for the portions of the project for which it meets the definition of “operator.” In many instances, there may be more than one party at a site performing tasks related to “operational control” and hence, more than one operator must submit an NOI. Depending on the site and the relationship between the parties (e.g., owner, contractor, etc.), there could be either a single party acting as site operator and consequently responsible for obtaining permit coverage, or there could be two or more operators all needing permit coverage.

The following are three general “**operator**” scenarios (variations on any of these three are possible, especially as the number of owners and contractors increases):

- ▶ “*Owner*” as “*Operator*” - *sole permittee*. The property owner designs the structures and control systems for the site, develops and implements the BMPP, and serves as general contractor (or has an on-site representative with full authority to direct day-to-day operations). Under the definition of operator, in this case, the “Owner” would be considered the “operator” and therefore the only party that needs permit coverage. Everyone else working on the site may be considered subcontractors and do not need to apply for permit

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<sup>1</sup> Defined in 40 CFR 122.2.

<sup>2</sup>For purposes of this permit, the “owner” of a property is the person, as defined by 40 CFR 122.2, holding the title, deed, or legal document to the regulated property, facility, or activity, including a party working under an easement on the property.

coverage.

- ▶ *“Contractor” as “Operator” - sole permittee.* The property owner hires a company (e.g., a contractor) to design the project and oversee all aspects, including preparation and implementation of the BMPP and compliance with the permit (e.g., a “turnkey” project). Here, the contractor would likely be the only party needing a permit. It is under this scenario that an individual having a personal residence built for his own use (e.g., not those to be sold for profit or used as rental property) would not be considered an operator. Similarly, EPA expects that property owners hiring a contractor or consultant to perform groundwater remediation work (e.g., due to a leaking fuel oil tank) would come under this type of scenario. EPA believes that the contractor, being a professional in the industry, should be the responsible entity rather than the individual. The contractor is better equipped to meet the requirements of both applying for permit coverage and developing and properly implementing the plans needed to comply with the permit. However, property owners would also meet the definition of “operator” and require permit coverage in instances where they perform any of the required tasks on their personal properties.
- ▶ *“Owner” and “Contractor” as “Operators” - co-permittees.* The owner retains control over any changes to site plans, BMPPs, or wastewater conveyance or control designs, but the contractor is responsible for conducting and overseeing the actual activities (e.g., excavation, installation and operation of treatment train, etc.) and daily implementation of BMPP and other permit conditions. In this case, **both** parties need to apply for coverage.

Generally, a person would not be considered an “operator,” and subsequently would not need permit coverage, if: 1) that person is a subcontractor hired by, and under the supervision of, the owner or a general contractor (e.g., if the contractor directs the subcontractor’s activities on-site, it is probably not an operator); or 2) the person’s activities would otherwise result in the need for coverage under the RGP but another operator has legally assumed responsibility for the impacts of project activities.

**A. Instructions for the Suggested Notice of Intent (NOI)** - At a minimum, the Notice of Intent must include the following for each individual facility or site. Additional information may be attached as needed.

**1. General facility/site information.**

- a) Provide the **facility/site** name, mailing address, and telephone and fax numbers. Provide the facility SIC code(s). Provide the site location, including longitude and latitude.
- b) Provide the property **owner’s** name, address, email address, telephone and fax numbers, if different from the site information. Indicate whether the owner is a Federal, State, Tribal, private, or other entity.
- c) Provide the site **operator’s** (e.g., contractor’s) name, mailing address, telephone and fax numbers, and email address if different from the owner’s information.
- d) For the site for which the application is being submitted, indicate whether:

- 1) a prior NPDES permit exclusion has been granted for the discharge (if so, provide the tracking number of the exclusion letter);
  - 2) a prior NPDES application (Form 1 & 2C) has ever been filed for the discharge (if so, provide the tracking number and date that the application was submitted to EPA);
  - 3) the discharge is a “new discharge” as defined by 40 CFR 122.2; and
  - 4) for sites in Massachusetts, is the discharge covered under the MA Contingency Plan (MCP) and exempt from state permitting.
- e) Indicate whether there is any ongoing state permitting, licensing, or other action regarding the facility or site which is generating the discharge. If “yes,” provide any site identification number assigned by the state of NH or MA, any permit or license number assigned, and the state agency contact information (e.g. name, location, telephone no.).
- f) Indicate whether or not the facility is covered by other EPA permits including: the multi-sector storm water general permit; the Phase I or II Construction Storm Water General Permit; an individual NPDES permit; or, any other water quality-related individual or general permit. If so, provide permit tracking number(s).

## **2. Discharge information.**

- a) Describe the discharge activities to be covered by the permit. Attach additional sheets as needed.
- b) Provide the following information about each discharge:
- 1) the number of discharge points;
  - 2) the **maximum** and **average flow rate** of the discharge in cubic feet per second. For the average flow magnitude, include the units and appropriate notation if this value is a calculated design value or estimate if technical/design information is not available;
  - 3) the latitude and longitude of each discharge with an accuracy of 100 feet (see EPA’s siting tool at: [http://www.epa.gov/tri/report/siting\\_tool/](http://www.epa.gov/tri/report/siting_tool/));
  - 4) the total volume of potential discharge (gal), only if hydrostatic testing;
  - 5) indication whether the discharge(s) is intermittent or seasonal and if ongoing.
- c) Provide the expected start and end dates of discharge (month/day/year)
- d) Attach a line drawing or flow schematic showing water flow through the facility including:
- 1) sources of intake water;
  - 2) contributing flow from the operation;
  - 3) treatment units; and
  - 4) discharge points and receiving waters(s).

**3. Contaminant information.** In order to complete section I.3. of the NOI, the applicant will need to take a minimum of one sample of the untreated water and have it analyzed for **all** of the parameters listed in Appendix III. The applicant may use historical data as a substitute for the new sample if the data was collected no more than 2 years prior to the effective date of the permit and if collected pursuant to: i. Massachusetts’ regulations 310 CMR 40.0000, the Massachusetts Contingency Plan (“Chapter 21E”); ii. New Hampshire’s Title 50 RSA 485-A: Water Pollution and Waste Disposal or Title 50 RSA 485-C: Groundwater Protection Act; or iii. an EPA permit exclusion letter issued pursuant to 40 CFR 122.3, and was analyzed with the test methods

required by this permit. Otherwise, a new sample shall be taken and analyzed.

- a) Based on the analysis of the sample(s) of the untreated influent, the applicant must indicate which of the sub-categories (listed in Table V of Part I.C of the permit) that the potential discharge falls within.
- b) Based on the analysis of the untreated influent, the applicant must indicate whether each listed chemical is **believed present** or **believed absent** in the potential discharge.

Based on the required sampling and analysis, the applicant must fill in the table, or provide a narrative description, with the following additional information for each chemical that is **believed present**:

- 1) the number of samples taken (minimum of one sample);
- 2) the type of sample (e.g. grab, composite, etc.);
- 3) the analytical method used, including the method number;
- 4) the minimum level (ML) of the method used (based on Appendix VI);
- 5) the maximum daily amount (concentration, ug/l, and mass, kg) of each pollutant, based on the sampling data (see Appendix VIII instructions for sample mass calculations); and
- 6) the average daily amount (concentration and mass) of each pollutant, based on the sampling data.

If the results of the required sampling indicate that pollutants exist in addition to those listed in Appendix III of the RGP of the permit, the applicant must also describe those contaminants on the NOI in boxes in section I.3.b) on the line marked “Other,” or using additional sheets as needed. Subsequently, EPA will decide if the RGP can apply or if an individual permit is necessary.

- c) Determination of Reasonable Potential and Allowable Dilution for Discharges of Metals:  
If any **metals** are believed present in the potential discharge to freshwater<sup>3</sup>, the applicant must follow the 2 step calculation procedures described below to determine the reasonable potential for exceedance of water quality standards and dilution factor for each metal.

### ***Step 1: Initial Evaluation***

- 1) The applicant must evaluate all metals believed present in the discharge subject to this permit, including “naturally occurring” metals such as dissolved and/or total Iron. Applicants must enter the highest detected concentration of the metal at zero dilution in the “Maximum value” column of the NOI.
- 2) Based on the maximum concentration of each metal, the applicant must perform an initial

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<sup>3</sup>Dilution factors may be available for discharges to saline waters but only with approval of the flow modeling information from the State prior to the submission of the NOI.

evaluation assuming zero dilution in the receiving water. The applicant must compare the metals concentrations in the untreated (intake) waters to the limits contained in Appendix III.

- i. If potential discharges (untreated influent) with metals contain concentrations above the concentration limits listed in Appendix III, applicant must proceed to step 2.
- ii. If potential discharges (untreated influent) with metals contain concentrations below the concentrations listed in Appendix III, the applicant may skip step 2 and those metals will **not** be subject to permit limitations or monitoring requirements.

### ***Step 2: Calculation of Dilution Factor***

1) **For applicants in NH:** If a metal concentration in a potential discharge (untreated influent) to **freshwater**<sup>3</sup> exceeds the limits in Appendix III with zero dilution, the applicant shall evaluate the potential concentration considering a dilution factor (DF) using the formula below. **For sites in New Hampshire, the applicant must contact NH DES to determine the 7Q10 and dilution factor.**

$$DF = [(Qd + Qs)/Qd] \times 0.9$$

**Where:**

<b>DF</b>	<b>= Dilution Factor</b>
<b>Qd</b>	<b>= Maximum flow rate of the discharge in cubic feet per second (cfs) (1.0 gpm = .00223 cfs)</b>
<b>Qs</b>	<b>= Receiving water 7Q10 flow, in cfs, where,</b>
<b>7Q10</b>	<b>= The annual minimum flow for 7 consecutive days with a recurrence interval of 10 years</b>
<b>0.9</b>	<b>= Allowance for reserving 10% of the assets in the receiving stream as per Chapter ENV-Ws 1700, Surface Water Quality Regulations</b>

i. Using the DF calculated from the formula above, the applicant must refer to the corresponding DF range column in Appendix IV. The applicant then compares the maximum concentration of the metal entered on the NOI to the corresponding total recoverable metals limits listed in Appendix IV.

1. If a metal concentration in the potential discharge (untreated influent) is less than the corresponding limit in Appendix IV, the metal will **not** be subject to permit limitations or monitoring requirements.
2. If a metal concentration in the potential discharge (untreated influent) is equal to or exceeds the corresponding limit in Appendix IV, the applicant must reduce it in the effluent to a concentration below the applicable total recoverable metals limit in Appendix IV prior to discharge.

ii. In either case, the applicant must submit the results of this calculation as part of the NOI. EPA and NH DES will review the proposed effluent limitations for each metal and approve or disapprove the limits in the notification of coverage letter to the applicant.

2) **For applicants in MA:** If a metal concentration in a in a potential discharge (untreated influent) to **freshwater**<sup>3</sup> exceeds the limits in Appendix III with zero dilution, the applicant must evaluate the potential concentration considering a dilution factor (DF) using the formula below.

$$DF = (Q_d + Q_s)/Q_d$$

**Where: DF** = **Dilution Factor**  
**Q<sub>d</sub>** = **Maximum flow rate of the discharge in cubic feet per second (cfs)**  
**(1.0 gpm = .00223 cfs)**  
**Q<sub>s</sub>** = **Receiving water 7Q10 flow (cfs) where,**  
**7Q10** = **The minimum flow (cfs) for 7 consecutive days with a recurrence interval of 10 years**

i. The applicant may estimate the 7Q10 for a receiving water by using available information such as nearby USGS stream gauging stations directly or by application of certain “flow factors,” using historic streamflow publication information, calculations based on drainage area, information from state water quality offices, or other means. In many cases the states of MA have calculated 7Q10 information using “flow factors” for a number of streams in the state. The source of the low flow value(s) used by the applicant must be included on NOI application form. Flow data can also be obtained from web applications such as STREAMSTATS located at: <http://ma.water.usgs.gov/streamstats/>.

ii. Using the DF calculated from the formula above, the applicant must refer to the corresponding DF range column in Appendix IV. The applicant then compares the maximum concentration of each metal entered on the NOI to the corresponding total recoverable metals limit listed in Appendix IV.

1. If a metal concentration in the potential discharge (untreated influent) is less than the corresponding limit in Appendix IV, the metal will **not** be subject to permit limitations or monitoring requirements.
2. If a metal concentration in a potential discharge (untreated influent) is equal to or exceeds the corresponding limit in Appendix IV, the applicant must reduce it in the effluent to a concentration below the applicable total recoverable metals limit in Appendix IV prior to discharge.

iii. The applicant must submit the results of this calculation as part of the NOI. EPA (and MA DEP where the discharge not covered by 310 CMR 40.0000) will review the proposed effluent limitations for each metal and approve or disapprove the limits in the notification of coverage letter to the applicant.

#### **4. Treatment system information.**

- a) Describe the treatment train for each discharge and attach a schematic of the proposed or existing treatment system.
- b) Identify each major treatment unit (e.g. frac tanks, filters, air stripper, liquid phase/vapor phase

activated carbon, oil/water separators, etc.) by checking all that apply and describing any additional equipment not listed. Provide a written description of how the system train will be set up. Attach additional sheets as needed.

c) Provide the proposed **average** and **maximum flow** rates (in gallons per minute, gpm) for the discharge and the **design flow** rates (in gpm) of the treatment system. Clearly identify the component of the treatment with the most limited flow, i.e., the part of the treatment train that establishes the **design flow**.

d) Describe any chemical additives being used, or planned to be used, and attach MSDS sheets for each. EPA may request further information regarding the chemical composition of the additive, potential toxic effects, or other information to insure that approval of the use of the additive will not cause or contribute to a violation of State water quality standards. Approval of coverage under the RGP will constitute approval of the use of the chemical additive(s). If coverage of the discharge under the RGP has already been granted and the use of a chemical additive becomes necessary, the permittee must submit a Notice of Change (NOC).

### **5. Receiving surface water(s) information.**

a) Identify the discharge pathway by checking whether it is discharged: directly to the receiving water, within the facility (e.g., through a sewer drain), to a storm drain, to a river or brook, to a wetland, or other receiving body.

b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters into which discharge will occur.

c) Provide a detailed map(s) indicating the location of the site and outfall to the receiving water:

1) For multiple discharges, the discharges should be numbered sequentially.

2) In the case of indirect dischargers (to municipal storm sewer, etc) the map(s) must be sufficient to indicate the location of the discharge to the indirect conveyance and the discharge to the state classified surface water. The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping), such as surface waters, drinking water supplies, and wetland areas.

d) Provide the state water quality classification of the receiving water and the basin;

e) Specify the reported seven day-ten year low flow (7Q10) of the receiving water (see Section I.A.3)c. above). In New Hampshire, the 7Q10 must be provided by to the applicant by the New Hampshire Department of Environmental Services.

f) Indicate whether the receiving water is a listed 303(d) water quality impaired or limited water and if so, for which pollutants (see Section VII.H. of the Fact Sheet for additional information). Also, indicate if there is a TMDL for any of the listed pollutants. For MA, the list of waters can be found at: <http://www.mass.gov/dep/brp/wm/tmdls.htm> and for NH:

<http://www.epa.gov/ne/eco/tmdl/impairedh2o.html>. For more information, contact the states at: New Hampshire Department of Environmental Services, Watershed Management Bureau at 603-271-3503 or the Massachusetts Department of Environmental Protection at 508-767-2796 or 508-767-2873;

**6. Consultation with Federal Services** - As required in Part I.A.4 and Appendix VII the operator of a site/facility must ensure that the potential discharge will not affect adversely endangered species, designated critical habitat, or essential fish habitat, or national historic places that are in proximity to the potential discharge. If the potential discharge is to certain water bodies, the applicant must also submit a formal certification with the NOI that indicates the consultation, with



the U.S. Fish and Wildlife Service and National Marine Fisheries Service (the Services), resulted in either a no jeopardy opinion or a written concurrence on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat. Facilities should begin the consultation as early in the process as possible.

a) Indicate whether any listed threatened or endangered species, designated critical habitat, or essential fish habitat, are in proximity to the discharge to be covered by this permit and whether any consultation with the Services is complete or underway.

b) Indicate whether or not there are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge (see <http://www.cr.nps.gov/nr/research/nris.htm>), and whether any state or tribal historic preservation officer (SHPO or THPO) was consulted in such a determination (for Massachusetts sites only).

**7. Supplemental information.** Applicants should provide any supplemental information needed to meet the requirements of the permit, including, any analytical data used to support the application, and any certification(s) required.

**8. Signature Requirements** - The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22, including the following certification:

*I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.*

## **B. Suggested Form for Notice of Intent (NOI) for the Remediation General Permit**

**1. General site information.** Please provide the following information about the site:

a) Name of <b>facility/site</b> :		Facility/site address:	
Location of <b>facility/site</b> : longitude:_____ latitude:_____	Facility SIC code(s):	Street:	
b) Name of <b>facility/site owner</b> :		Town:	
Email address of owner:	State:	Zip:	County:
Telephone no.of facility/site <b>owner</b> :			
Fax no. of facility/site <b>owner</b> :		<b>Owner</b> is (check one): 1. Federal____ 2. State/Tribal____ 3. Private____ 4. other, if so, describe:	
Address of <b>owner</b> (if different from site):			
Street:			
Town:	State:	Zip:	County:
c) Legal name of <b>operator</b> :	<b>Operator</b> telephone no:		
	<b>Operator</b> fax no.:		<b>Operator</b> email:
<b>Operator</b> contact name and title:			
Address of <b>operator</b> (if different from owner):		Street:	
Town:	State:	Zip:	County:
d) Check “yes” or “no” for the following: 1. Has a prior NPDES permit exclusion been granted for the discharge? Yes___ No___, if “yes,” number: 2. Has a prior NPDES application (Form 1 & 2C) ever been filed for the discharge? Yes___ No___, if “yes,” date and tracking #: 3. Is the discharge a “new discharge” as defined by 40 CFR 122.2? Yes___ No___ 4. For sites in Massachusetts, is the discharge covered under the MA Contingency Plan (MCP) and exempt from state permitting? Yes__ No__			

<p>e) Is site/facility subject to any State permitting or other action which is causing the generation of discharge? Yes___ No___</p> <p>If “yes,” please list:</p> <ol style="list-style-type: none"> <li>1. site identification # assigned by the state of NH or MA:</li> <li>2. permit or license # assigned:</li> <li>3. state agency contact information: name, location, and telephone number:</li> </ol>	<p>f) Is the site/facility covered by any other EPA permit, including:</p> <ol style="list-style-type: none"> <li>1. multi-sector storm water general permit? Y___ N___, if Y, number:</li> <li>2. phase I or II construction storm water general permit? Y___ N___, if Y, number:</li> <li>3. individual NPDES permit? Y___ N___, if Y, number:</li> <li>4. any other water quality related permit? Y___ N___, if Y, number:</li> </ol>
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**2. Discharge information.** Please provide information about the discharge, (attaching additional sheets as needed) including:

a) Describe the discharge activities for which the owner/applicant is seeking coverage:			
b) Provide the following information about each discharge:	<table border="1"> <tr> <td style="vertical-align: top;">1) Number of discharge points:</td> <td style="vertical-align: top;">                 2) What is the <b>maximum</b> and <b>average flow rate</b> of discharge (in cubic feet per second, ft<sup>3</sup>/s)? Max. flow_____ Average flow_____ Is maximum flow a <b>design value</b>? Y___ N___                  For average flow, include the units and appropriate notation if this value is a design value or estimate if not available.             </td> </tr> </table>	1) Number of discharge points:	2) What is the <b>maximum</b> and <b>average flow rate</b> of discharge (in cubic feet per second, ft <sup>3</sup> /s)? Max. flow_____ Average flow_____ Is maximum flow a <b>design value</b> ? Y___ N___ For average flow, include the units and appropriate notation if this value is a design value or estimate if not available.
1) Number of discharge points:	2) What is the <b>maximum</b> and <b>average flow rate</b> of discharge (in cubic feet per second, ft <sup>3</sup> /s)? Max. flow_____ Average flow_____ Is maximum flow a <b>design value</b> ? Y___ N___ For average flow, include the units and appropriate notation if this value is a design value or estimate if not available.		
3) Latitude and longitude of each discharge within 100 feet: pt.1:long._____ lat._____; pt.2: long._____ lat._____; pt.3: long._____ lat._____; pt.4:long._____ lat._____; pt.5: long._____ lat._____; pt.6:long._____ lat._____; pt.7: long._____ lat._____; pt.8:long._____ lat._____; etc.			
4) If hydrostatic testing, total volume of the discharge (gals):	5) Is the discharge intermittent_____or seasonal_____ Is discharge ongoing Yes _____ No _____?___		
c) Expected dates of discharge (mm/dd/yy): start_____ end_____			
d) Please attach a line drawing or flow schematic showing water flow through the facility including: 1. sources of intake water, 2. contributing flow from the operation, 3. treatment units, and 4. discharge points and receiving waters(s).			

3. Contaminant information. In order to complete this section, the applicant will need to take a minimum of one sample of the untreated water and have it analyzed for **all** of the parameters listed in Appendix III. Historical data, (i.e., data taken no more than 2 years prior to the effective date of the permit) may be used if obtained pursuant to: i. Massachusetts' regulations 310 CMR 40.0000, the Massachusetts Contingency Plan ("Chapter 21E"); ii. New Hampshire's Title 50 RSA 485-A: Water Pollution and Waste Disposal or Title 50 RSA 485-C: Groundwater Protection Act; or iii. an EPA permit exclusion letter issued pursuant to 40 CFR 122.3, provided the data was analyzed with test methods that meet the requirements of this permit. Otherwise, a new sample shall be taken and analyzed.

a) Based on the analysis of the sample(s) of the untreated influent, the applicant must check the box of the sub-categories that the potential discharge falls within.

Gasoline Only	VOC Only	Primarily Metals	Urban Fill Sites	Contaminated Sumps	Mixed Contaminants	Aquifer Testing
Fuel Oils (and Other Oils) only	VOC with Other Contaminants	Petroleum with Other Contaminants	Listed Contaminated Sites	Contaminated Dredge Condensates	Hydrostatic Testing of Pipelines/Tanks	Well Development or Rehabilitation

b) Based on the analysis of the untreated influent, the applicant must indicate whether each listed chemical is **believed present** or **believed absent** in the potential discharge. Attach additional sheets as needed.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
1. Total Suspended Solids										
2. Total Residual Chlorine										
3. Total Petroleum Hydrocarbons										
4. Cyanide										
5. Benzene										
6. Toluene										
7. Ethylbenzene										
8. (m,p,o) Xylenes										
9. Total BTEX <sup>4</sup>										

<sup>4</sup>BTEX = Sum of Benzene, Toluene, Ethylbenzene, total Xylenes.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
10. Ethylene Dibromide <sup>5</sup> (1,2- Dibromo-methane)										
11. Methyl-tert-Butyl Ether (MtBE)										
12. tert-Butyl Alcohol (TBA)										
13. tert-Amyl Methyl Ether (TAME)										
14. Naphthalene										
15. Carbon Tetra-chloride										
16. 1,4 Dichlorobenzene										
17. 1,2 Dichlorobenzene										
18. 1,3 Dichlorobenzene										
19. 1,1 Dichloroethane										
20. 1,2 Dichloroethane										
21. 1,1 Dichloroethylene										
22. cis-1,2 Dichloro-ethylene										
23. Dichloromethane (Methylene Chloride)										
24. Tetrachloroethylene										

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<sup>5</sup>EDB is a groundwater contaminant at fuel spill and pesticide application sites in New England.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min- imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily Value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
25. 1,1,1 Trichloroethane										
26. 1,1,2 Trichloroethane										
27. Trichloroethylene										
28. Vinyl Chloride										
29. Acetone										
30. 1,4 Dioxane										
31. Total Phenols										
32. Pentachlorophenol										
33. Total Phthalates <sup>6</sup> (Phthalate esthers)										
34. Bis (2-Ethylhexyl) Phthalate [Di- (ethylhexyl) Phthalate]										
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)										
a. Benzo(a) Anthracene										
b. Benzo(a) Pyrene										
c. Benzo(b)Fluoranthene										
d. Benzo(k) Fluoranthene										
e. Chrysene										

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<sup>6</sup>The sum of individual phthalate compounds.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min- imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Average daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
<b>f. Dibenzo(a,h) anthracene</b>										
<b>g. Indeno(1,2,3-cd) Pyrene</b>										
<b>36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)</b>										
<b>h. Acenaphthene</b>										
<b>i. Acenaphthylene</b>										
<b>j. Anthracene</b>										
<b>k. Benzo(ghi) Perylene</b>										
<b>l. Fluoranthene</b>										
<b>m. Fluorene</b>										
<b>n. Naphthalene-</b>										
<b>o. Phenanthrene</b>										
<b>p. Pyrene</b>										
<b>37. Total Polychlorinated Biphenyls (PCBs)</b>										
<b>38. Antimony</b>										
<b>39. Arsenic</b>										
<b>40. Cadmium</b>										
<b>41. Chromium III</b>										
<b>42. Chromium VI</b>										

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
43. Copper										
44. Lead										
45. Mercury										
46. Nickel										
47. Selenium										
48. Silver										
49. Zinc										
50. Iron										
Other (describe):										

c) For discharges where **metals** are believed present, please fill out the following:

<p><i>Step 1:</i> Do any of the metals in the influent have a <b>reasonable potential</b> to exceed the effluent limits in Appendix III (i.e., the limits set at zero to five dilutions)? Y____ N____</p>	<p>If yes, which metals?</p>
<p><i>Step 2:</i> For any metals which have <b>reasonable potential</b> to exceed the <b>Appendix III</b> limits, calculate the <b>dilution factor (DF)</b> using the formula in Part I.A.3.c) (step 2) of the NOI instructions or as determined by the State prior to the submission of this NOI.  What is the dilution factor for applicable metals?  Metals: _____  DF: _____</p>	<p>Look up the limit calculated at the corresponding dilution factor in <b>Appendix IV</b>. Do any of the metals in the <b>influent</b> have the potential to exceed the corresponding <b>effluent</b> limits in Appendix IV (i.e., is the influent concentration above the limit set at the calculated dilution factor)?  Y____ N____ If “Yes,” list which metals:</p>



**4. Treatment system information.** Please describe the treatment system using separate sheets as necessary, including:

a) A description of the treatment system, including a schematic of the proposed or existing treatment system:						
b) Identify each applicable treatment unit (check all that apply):	Frac. tank	Air stripper	Oil/water separator	Equalization tanks	Bag filter	GAC filter
	Chlorination	Dechlorination	Other (please describe):			
c) Proposed <b>average</b> and <b>maximum flow rates</b> (gallons per minute) for the discharge and the <b>design flow rate(s)</b> (gallons per minute) of the treatment system: Average flow rate of discharge _____ Maximum flow rate of treatment system _____ Design flow rate of treatment system _____						
d) A description of chemical additives being used or planned to be used (attach MSDS sheets):						

**5. Receiving surface water(s).** Please provide information about the receiving water(s), using separate sheets as necessary:

a) Identify the discharge pathway:	Direct _____	Within facility__	Storm drain_____	River/brook_____	Wetlands _____	Other (describe):
b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters:						
c) Attach a detailed map(s) indicating the site location and location of the outfall to the receiving water: 1. For multiple discharges, number the discharges sequentially. 2. For indirect dischargers, indicate the location of the discharge to the indirect conveyance and the discharge to surface water The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping), such as surface waters, drinking water supplies, and wetland areas.						
d) Provide the state water quality classification of the receiving water _____,						
e) Provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water _____ cfs Please attach any calculation sheets used to support stream flow and dilution calculations.						
f) Is the receiving water a listed 303(d) water quality impaired or limited water? Yes _____ No _____ If yes, for which pollutant(s)? Is there a TMDL? Yes _____ No _____ If yes, for which pollutant(s)?						

**6. Results of Consultation with Federal Services:** Please provide the following information according to requirements of Part I.B.4 and Appendices II and VII.

a) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes____ No____ Has any consultation with the federal services been completed ? Yes____ No____ or is consultation underway? Yes____ No____ What were the results of the consultation with the U.S. Fish and Wildlife Service and/or National Marine Fisheries Service (check one): a “no jeopardy” opinion? _____or written concurrence_____ on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat?
b) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge? Yes_____ No_____ Have any state or tribal historic preservation officer been consulted in this determination (Massachusetts only)? Yes_____ No_____

**7. Supplemental information. :**

Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) required by the general permit.
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**8. Signature Requirements:** The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22, including the following certification:

*I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.*

Facility/Site Name:
Operator signature:
Title:
Date:

**B. Submission of NOI to EPA** - All operators applying for coverage under this General Permit must submit a written Notice of Intent (NOI) to EPA. Signed and completed NOI forms and attachments must be submitted to EPA-NE at:

US Environmental Protection Agency  
Shelly Puleo  
Industrial NPDES Permits (CIP),  
1 Congress Street, Suite 1100  
Boston, MA 02114-2023

or electronically mailed to [NPDES.Generalpermits@epa.gov](mailto:NPDES.Generalpermits@epa.gov),  
or faxed to the EPA Office at 617-918-2064.

If filling out the suggested NOI form electronically on EPA's website, the signature page must be signed and faxed or mailed to EPA at the phone number or address listed in Section I.B. below.

1. Filing with the states - A copy of any NOI form filed with EPA-NE must also be filed with state agencies. The state agency may elect to develop a state specific form or other information requirements.

a) Discharges in Massachusetts - In addition to the NOI, permit applicants must submit copies of the State Application Form BRPWM 12, Request for General Permit coverage for the RGP. The application form and the Transmittal Form for Permit Application and Payment, may be obtained from the Massachusetts Department of Environmental Protection (MA DEP) website at [www.state.ma.us/dep](http://www.state.ma.us/dep). Municipalities are fee-exempt, but should send a copy of the transmittal form to that address for project tracking purposes. All applicants should keep a copy of the transmittal form and a copy of the application package for their records.

1) A copy of the NOI, the transmittal form, a copy of the check, and Form BRPWM 12 should be sent to:

Massachusetts Department of Environmental Protection  
Division of Watershed Management  
627 Main Street, 2<sup>nd</sup> floor  
Worcester, MA 01608

2) A copy of the transmittal form and the appropriate fee should be sent to:

Massachusetts Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02111

Please note: Applicants for discharges in Massachusetts should note that under 310 CMR 40.000, *as a matter of state law*, the general permit only applies to discharges that are **not** subject to the Massachusetts Contingency Plan (MCP) and 310 CMR 40.000. Therefore, discharges subject to the MCP are **not** required to fill out and submit the State Application Form BRPWM 12 or pay the state fees. However, they must submit a NOI to EPA.

b) Discharges in New Hampshire - applicants must provide a copy of the Notice of Intent to:

New Hampshire Department of Environmental Services  
Water Division  
Wastewater Engineering Bureau  
P.O. Box 95  
Concord, New Hampshire 03302-0095.

2. Filing with Municipalities - A copy of the NOI must be submitted to the municipality in which the proposed discharge would be located.